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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

B 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture	Peggy First name A Middle name Scheu	First name Middle name
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Peggy Ann Roberts	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-7179	

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Debtor 1 Peggy A Scheu

Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years

Include trade names and doing business names

EINS

About Debtor 2 (Spouse Only in a Joint Case):

I have not used any business name or EINs.

Business name(s)

EINS

Business name(s)

EINS

EINS

5. Where you live

6736 Revere Rd. Downers Grove, IL 60516

Number, Street, City, State & ZIP Code

DuPage

County

If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

If Debtor 2 lives at a different address:

Case number (if known)

Number, Street, City, State & ZIP Code

County

If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.

Number, P.O. Box, Street, City, State & ZIP Code

Why you are choosing this district to file for bankruptcy

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Document Case number (if known) Debtor 1 Peggy A Scheu

Par	Tell the Court About	our Ba	ankruptcy Ca	se						
7.	The chapter of the Bankruptcy Code you are	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.								
	choosing to file under	■ Ch	napter 7							
		☐ Ch	napter 11							
		☐ Ch	napter 12							
		☐ Ch	napter 13							
8.	How you will pay the fee		about how yo	u may pay. Typically attorney is submittir	y, if you are paying the fee yo	k with the clerk's office in your local ourself, you may pay with cash, cashinalf, your attorney may pay with a crec	er's check, or money			
						on, sign and attach the Application for	r Individuals to Pay			
			J	e in Installments (Ot t my fee he waived	,	n only if you are filing for Chapter 7. E	Ry law a judge may			
			but is not required that applies to	uired to, waive your o your family size ar	fee, and may do so only if yo nd you are unable to pay the f	ire in you are filling for Ghapter 7.2 urr income is less than 150% of the or fee in installments). If you choose this Official Form 103B) and file it with you	fficial poverty line soption, you must fill			
9.	Have you filed for bankruptcy within the last 8 years?	■ No								
	•		District		When	Case number				
			District		When	Case number				
			District		When	Case number				
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	□ No ■ Yes								
			Debtor	Thomas Scheu	1	Relationship to you	Spouse			
			District	California	When	Case number, if known				
			Debtor			Relationship to you				
			District		When	Case number, if known				
11.	Do you rent your residence?	■ No	Go to li	ne 12.						
	residence:	☐ Ye	s. Has yo	ur landlord obtained	an eviction judgment agains	t you and do you want to stay in your	residence?			
				No. Go to line 12.						
				Yes. Fill out <i>Initial</i> S bankruptcy petition		Judgment Against You (Form 101A) a	and file it with this			

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Deb	otor 1 Peggy A Scheu			Docume	ent	Page	e 4 of !	54 Ca	ase numbe	r (if known)				
Par	t 3: Report About Any Bu	sinesses	You Own a	ıs a Sole Propriet	or									
	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to P	<u> </u>										
		☐ Yes.	Name a	and location of bus	iness									
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name o	of business, if any										
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	r, Street, City, Sta	e & ZIP	Code								
	it to this petition.		Check	the appropriate bo	x to des	cribe yo	ur busine	ess:						
				Health Care Busin	ess (as	defined	in 11 U.S	S.C. § 1	01(27A))					
				Single Asset Real	Estate	(as defin	ned in 11	U.S.C.	§ 101(51B))				
				Stockbroker (as d	efined ir	11 U.S	.C. § 101	(53A))						
				Commodity Broke	r (as de	fined in	11 U.S.C	. § 101(6))					
				None of the above)									
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you ind	er Chapter 11, the icate that you are w statement, and f (B).	a small	busines	s debtor,	you mu	st attach y	our most	recent b	alance sl	heet, sta	atement of
	For a definition of small	■ No.	I am no	t filing under Chap	ter 11.									
	business debtor, see 11 U.S.C. § 101(51D).	lebtor, see 11		I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptc Code.							ankruptcy			
		☐ Yes.	l am fili	ng under Chapter	11 and I	l am a sı	mall busii	ness de	btor accord	ding to the	e definiti	on in the	Bankru	otcy Code.
Par	t 4: Report if You Own or	Have Any	y Hazardou	s Property or An	/ Prope	rty That	Needs I	mmedia	ate Attenti	on				
14.	Do you own or have any	■ No.												
	property that poses or is alleged to pose a threat	☐ Yes.												
	of imminent and identifiable hazard to		What is th	e hazard?										
	public health or safety? Or do you own any property that needs immediate attention?			ate attention is //hy is it needed?										
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	the property?										
	5 · · · · · · · · · · · ·					0	21 21 1	0.7: 0						

Number, Street, City, State & Zip Code

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Debtor 1 Peggy A Scheu

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Case number (if known)

15. Tell the court whether you have received a briefing about credit

counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a

mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability. My physical disability causes

me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military

combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity. I have a mental illness or a mental deficiency that makes me incapable

of realizing or making rational decisions about finances.

Disability. My physical disability causes me to

be upable to participate in a briefing.

be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried

to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver

of credit counseling with the court.

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Deb	tor 1 Peggy A Sche	u	Docum	Case nun	nber (if known)
Part	6: Answer These Qu	estions for Re	eporting Purposes		
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are creanal, family, or household purpose."	defined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			■ Yes. Go to line 17.		
		16b.		pusiness debts? Business debts are deleastment or through the operation of the	•
			☐ No. Go to line 16c.		
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or bus	iness debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded a	■ Yes.		Do you estimate that after any exempt pds will be available to distribute to unsecu	
	administrative expens	es	■ No		
	be available for distribution to unsecu creditors?		Yes		
18.	How many Creditors of you estimate that you owe?	1-49 □ 50-99 □ 100-19 □ 200-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
19.	How much do you estimate your assets t be worth?	■ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	□ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion
20.	How much do you estimate your liabilitie to be?	■ \$100,0	50,000 01 - \$100,000 001 - \$500,000 001 - \$1 million	□ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion
Part	7: Sign Below				
For	you	If I have of United St If no attor documen I request I understate bankrupto 1519, and Isl Peggy Peggy P	chosen to file under Chapter ates Code. I understand the relief in accordance with the relief in	relief available under each chapter, and I not pay or agree to pay someone who is the notice required by 11 U.S.C. § 342(b) chapter of title 11, United States Code, at, concealing property, or obtaining mono to \$250,000, or imprisonment for up to Signature of De	ble, under Chapter 7, 11,12, or 13 of title 11, I choose to proceed under Chapter 7. s not an attorney to help me fill out this . specified in this petition. ey or property by fraud in connection with a 20 years, or both. 18 U.S.C. §§ 152, 1341,
			ואוואו / טט / א א א	ľ	MM / DD / YYYY

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Debtor 1 Peggy A Scheu Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Dennis	e L. McCann	Date D	ecember 31, 2015	
Signature of	Attorney for Debtor	N	IM / DD / YYYY	
Dennise L	. McCann			
Printed name				
Anderson Firm name	& Associates, P.C.			
400 S. Cou	ınty Farm Rd.			
Suite 320				
Wheaton,	IL 60187			
Number, Street,	City, State & ZIP Code			
Contact phone	(630) 653-9400	Email address		
6197960				
Par number 9 Ct	into		•	

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	DUCUIII	till Paue o Ul 54	
mation to identify your	case:		
Peggy A Scheu			
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
			_
			L
	Peggy A Scheu First Name	Peggy A Scheu First Name Middle Name First Name Middle Name	Peggy A Scheu First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Check if this is an amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	168,095.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	84,302.45
	1c. Copy line 63, Total of all property on Schedule A/B	\$	252,397.45
Par	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	306,046.31
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	67,533.26
	Your total liabilities	\$	373,579.57
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	2,911.29
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,042.23
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other s	chedules.
7.	■ Yes What kind of debt do you have?		
	Vous debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for		l family or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Case number (if known) Debtor 1 Peggy A Scheu

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

3,840.52

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Total	claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	526.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	s \$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	526.00

С	ase 15-43821	Doc 1		12/31/15 ument	Entered 2		5 16:14:3	3 De	sc N	Main
Fill in this info	rmation to identify yo	ur case and th	nis filing	g:						
Debtor 1	Peggy A Scheu									
Dalatara	First Name	Middle	Name		Last Name					
Debtor 2 (Spouse, if filing)	First Name	Middle	Name		Last Name					
United States E	Bankruptcy Court for the	: NORTHER	N DIST	RICT OF ILLIN	IOIS					
Case number										Check if this is an amended filing
	orm 106A/B									
Schedu	le A/B: Pro	perty								12/15
1. Do you own or ☐ No. Go to Pa ☐ Yes. Where	e Each Residence, Buildin have any legal or equitable art 2. e is the property?	<u> </u>	ny reside	nce, building, la	nd, or similar pro	perty?				
1.1 6736 Re v	vere Road		wnat		Check all that app	ріу.				
	s, if available, or other descripti	ion	_	Single-family h						r exemptions. Put the n Schedule D:
				Duplex or multi	ū		Creditors Who	o Have Clair	ns Sed	cured by Property.
				Condominium						
Downers	Grove IL 60	0516-0000		Manufactured of Land	or mobile home		Current value			rent value of the tion you own?
City	State	ZIP Code		Investment pro	pertv			,190.00	po.	\$168,095.00
				Timeshare	, ,		<u> </u>		_	•
				Other						vnership interest
			Who lone.	has an interest i	n the property? C	Check	(such as fee s a life estate),		ancy b	y the entireties, or

2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here.....=>

☐ Debtor 1 only

☐ Debtor 2 only

☐ Debtor 1 and Debtor 2 only

property identification number:

At least one of the debtors and another

Other information you wish to add about this item, such as local

\$168,095.00

Fee simple

(see instructions)

Check if this is community property

Part 2: Describe Your Vehicles

DuPage

County

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Document Page 11 of 54 Case number (if known) Debtor 1 Peggy A Scheu 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Hyundai Do not deduct secured claims or exemptions. Put Who has an interest in the property? Check one. Make: the amount of any secured claims on Schedule D: Elantra ■ Debtor 1 only Creditors Who Have Claims Secured by Property. Model 2013 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another \$11,000.00 \$11,000.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$11,000,00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe..... Beds, Couches, Dressers, End Tables, Appliances (50% interest) \$1,500.00 7 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ☐ No Yes. Describe..... Televisions, Computer, Printers (50% interest) \$500.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No

☐ Yes. Describe.....

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Desc Main

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Official Form 106A/B

Schedule A/B: Property

Fifth Third Bank

Fidelity

\$54.12

\$176.18

Savings

17.4.

17.5.

Case 15-43821 Doc 1 Filed 12/31/15 Entered 12/31/15 16:14:33 Desc Main Document Page 13 of 54 Case number (if known) Debtor 1 Peggy A Scheu 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts □ No Institution or issuer name: ■ Yes..... Exelon Stock (1/2 interest; Mother has other 50%) \$1.374.00 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) **TIAA-CREF** \$28,913.00 **Fidelity** \$37,343.38 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ■ No Institution name or individual: ☐ Yes. 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No ☐ Yes..... Issuer name and description. 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

portion you own?

Do not deduct secured claims or exemptions.

☐ Yes. Give specific information about them...

Money or property owed to you?

Current value of the

Debtor 1	Peggy A Sche	Document	Page 14 of 54 Case number (if k	nown)
Debior 1	reggy A Sche	u		
	efunds owed to you	ı		
■ No	0.5	and the second decree the best and the second	les et Cle dub e reteres es dub e terres	
⊔ Ye	s. Give specific inforr	nation about them, including whether you a	ilready filed the returns and the tax years.	
	ly support			
_	nples: Past due or lu	mp sum alimony, spousal support, child su	pport, maintenance, divorce settlement, p	roperty settlement
■ No	0: '" : '			
⊔ Ye	s. Give specific inforr	nation		
	r amounts someone	e owes you , disability insurance payments, disability b	enefits sick nav vacation nav workers'	compensation Social Security
Lxai		id loans you made to someone else	chems, sick pay, vacation pay, workers	compensation, obeid occurry
■ No				
☐ Ye	s. Give specific infor	mation		
31 Inter	ests in insurance po	olicies		
		ity, or life insurance; health savings accour	nt (HSA); credit, homeowner's, or renter's	insurance
☐ No				
Yes	s. Name the insurance	ce company of each policy and list its value		
		Company name:	Beneficiary:	Surrender or refund value:
		Term life insurance provided thro	ough	
		employer	Thomas Scheu	\$0.00
33. Clain Exan No Yes 34. Othe No Yes 35. Any f	mples: Accidents, em s. Describe each cla r contingent and un s. Describe each cla	ties, whether or not you have filed a law ployment disputes, insurance claims, or rigin Iliquidated claims of every nature, including im did not already list	hts to sue	ghts to set off claims
		all of your entries from Part 4, including imber here		
Part 5:	Describe Any Business	-Related Property You Own or Have an Interes	t In. List any real estate in Part 1.	
07 D	1 1			
	i own or nave any lega So to Part 6.	I or equitable interest in any business-related p	property?	
_	Go to line 38.			
□ res.	GO to line so.			
		d Commercial Fishing-Related Property You O	wn or Have an Interest In.	
li	you own or nave an inte	erest in farmland, list it in Part 1.		
46. Do y e	ou own or have any	legal or equitable interest in any farm-	or commercial fishing-related property?	?
■ N	o. Go to Part 7.			
☐ Y	es. Go to line 47.			

Schedule A/B: Property

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Debtor 1 Peggy A Scheu

> Current value of the portion you own?
> Do not deduct secured claims or exemptions.

Part	7: Describe All Property You Own or Have an Interest in That You I	Did Not L	ist Above		
53.	Do you have other property of any kind you did not already Examples: Season tickets, country club membership	list?			
	No				
	Yes. Give specific information				
54.	Add the dollar value of all of your entries from Part 7. Writ	te that r	number here		\$0.00
Part	8: List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$168,095.00
56.			\$11,000.00	_	· · ·
57.	Part 3: Total personal and household items, line 15		\$3,700.00		
58.	Part 4: Total financial assets, line 36		\$69,602.45		
59.	Part 5: Total business-related property, line 45		\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61	_	\$84,302.45	Copy personal property total	\$84,302.45
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$252,397.45

Official Form 106A/B Schedule A/B: Property page 6 Case 15-43821 Doc 1 Filed 12/31/15 Entered 12/31/15 16:14:33 Desc Main

Page 16 of 54 Document Fill in this information to identify your case: Debtor 1 Peggy A Scheu Middle Name Last Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

amended filing

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	, ,		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
6736 Revere Road Downers Grove, IL 60516 DuPage County	\$336,190.00		\$15,000.00	735 ILCS 5/12-901
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
2013 Hyundai Elantra Line from Schedule A/B: 3.1	\$11,000.00		\$2,400.00	735 ILCS 5/12-1001(c)
Ellie Holli Schedule Av.D. 4.1			100% of fair market value, up to any applicable statutory limit	
Beds, Couches, Dressers, End Tables, Appliances (50% interest)	\$1,500.00		\$1,500.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
Ordinary Clothing Line from Schedule A/B: 11.1	\$500.00		\$500.00	735 ILCS 5/12-1001(a)
Ellic Holli Gonedale Av.B. TTT			100% of fair market value, up to any applicable statutory limit	
Misc jewelry Line from Schedule A/B: 12.1	\$1,200.00		\$1,095.80	735 ILCS 5/12-1001(b)
LINE HOLLI SCHEUUIE PAD. 12.1			100% of fair market value, up to any applicable statutory limit	

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Case number (if known)

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Fifth Third Bank Line from Schedule A/B: 17.1	\$1,367.01		\$576.05	735 ILCS 5/12-1001(b)
			100% of fair market value, up to any applicable statutory limit	
American Chartered Bank Free Checking (50% interest)	\$106.12		\$53.06	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 17.3			100% of fair market value, up to any applicable statutory limit	
Fidelity Line from Schedule A/B: 17.5	\$176.18		\$88.09	735 ILCS 5/12-1001(b)
Line from Scriedule AVB: 17.3			100% of fair market value, up to any applicable statutory limit	
Exelon Stock (1/2 interest; Mother has other 50%)	\$1,374.00		\$687.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 18.1			100% of fair market value, up to any applicable statutory limit	
401(k): TIAA- CREF Line from Schedule A/B: 21.1	\$28,913.00		\$28,913.00	735 ILCS 5/12-1006
Life Hoth Schedule AVD. 21.1			100% of fair market value, up to any applicable statutory limit	
Fidelity Line from Schedule A/B: 21.2	\$37,343.38		\$37,343.38	735 ILCS 5/12-1006
Life from Schedule A/D. 2112			100% of fair market value, up to any applicable statutory limit	
Are you claiming a homestead exemption (Subject to adjustment on 4/01/16 and every			illed on or after the date of adjustme	ent.)
Yes. Did you acquire the property cove	ered by the exemption w	rithin 1	,215 days before you filed this case	e?
□ No				

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		Document	Page 18	3 of 54		
Fill in this inform	nation to identify you	ır case:				
Debtor 1	Peggy A Scheu	Middle Norse	Loot Name		-	
Debtor 2	First Name	Middle Name	Last Name			
(Spouse if, filing)	First Name	Middle Name	Last Name		-	
United States Ba	nkruptcy Court for the:	NORTHERN DISTRICT OF ILLII	NOIS		-	
Case number					_	if this is an ed filing
Official Forn						
Schedule	D: Creditors	Who Have Claims S	ecured	d by Propert	У	12/15
		two married people are filing together, number the entries, and attach it to this				
1. Do any creditors	have claims secured by	your property?				
☐ No. Check	this box and submit th	his form to the court with your other s	schedules. Y	ou have nothing else	to report on this form.	
Yes, Fill in	all of the information	below.		-	·	
	II Secured Claims	Joiew.				
2. List all secured each claim. If more as possible, list the	claims. If a creditor has m than one creditor has a pa claims in alphabetical orde	ore than one secured claim, list the creditor articular claim, list the other creditors in Paer according to the creditor's name.		Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Z.1 I = -	Chartered	Describe the property that secures the	o claim:	\$48,216.97	\$336,190.00	\$0.00
Creditor's Name	9	6736 Revere Road Downers C IL 60516 DuPage County		<u> </u>		
4685 Winf Warrenvil	field Rd. le, IL 60555	As of the date you file, the claim is: Chapply. Contingent	leck all that			
	, City, State & Zip Code	☐ Unliquidated				
Who owes the de		Disputed Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mo car loan)	ortgage or secu	ured		
Debtor 2 only	obtor 2 only	Statutory lien (such as tax lien, mech	aniala lian)			
Debtor 1 and De	-	☐ Statutory lien (such as tax lien, mechanisms) ☐ Judgment lien from a lawsuit	anic's lien)			
	ne debtors and another		Third			
Check if this cla		Other (including a right to offset)	Mortgage	<u>e</u>		
Date debt was incu	ırred <u>8/15</u>	Last 4 digits of account numbe	er 0001			
2.2 Fifth Third	d Bank	Describe the property that secures the	e claim:	\$13,152.06	\$11,000.00	\$2,152.06
Creditor's Name	9	2013 Hyundai Elantra		·		
5050 King Cincinnat	jsley Dr. i, OH 45227	As of the date you file, the claim is: Chapply. Contingent	leck all that			
Number, Street,	, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the de	ebt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only		☐ An agreement you made (such as mo car loan)	ortgage or secu	ured		
Debtor 1 and De	ebtor 2 only	☐ Statutory lien (such as tax lien, mech	anic's lien)			
_	ne debtors and another	☐ Judgment lien from a lawsuit	•			
Check if this cla	aim relates to a	■ Other (including a right to offset)	Car Loan	1		
Date debt was incu	ırred 12/13	Last 4 digits of account numbe	r 0938			

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Debtor 1 Peggy A Scheu		Cas	e number (if know)		
First Name Middle N	Name Last Name				
2.3 Lisle Savings Bank	Describe the property that secures the	claim:	\$45,385.20	\$336,190.00	\$0.00
Creditor's Name	6736 Revere Road Downers G IL 60516 DuPage County		<u> </u>		*
1450 Maple Ave Lisle, IL 60532	As of the date you file, the claim is: Che apply. Contingent	eck all that			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	An agreement you made (such as more car loan)	rtgage or secured			
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	ınic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	Other (including a right to offset)	First Mortgage			
Date debt was incurred 06/03	Last 4 digits of account number	3149			
2.4 PNC Bank	Describe the property that secures the	claim:	\$199,292.08	\$336,190.00	\$0.00
Creditor's Name	6736 Revere Road Downers G IL 60516 DuPage County		<u> </u>		
PO Box 3180 Pittsburgh, PA 15230	As of the date you file, the claim is: Cheapply. Contingent	eck all that			
Number, Street, City, State & Zip Code	☐ Unliquidated ☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
☐ Debtor 1 only	☐ An agreement you made (such as mo	rtgage or secured			
Debtor 2 only	car loan)				
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	ınic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit				
☐ Check if this claim relates to a community debt	■ Other (including a right to offset)	Second Mortgage -Home Equity Line			
Date debt was incurred 02/08	Last 4 digits of account number				
Add the dollar value of your entries in C	olumn A on this page. Write that number	here:	\$306,046.31]	
If this is the last page of your form, add Write that number here:	the dollar value totals from all pages.		\$306,046.31		
Part 2: List Others to Be Notified for	or a Debt That You Already Listed				
Use this page only if you have others to be to collect from you for a debt you owe to screditor for any of the debts that you listed to not fill out or submit this page.	someone else, list the creditor in Part 1, a	nd then list the c	ollection agency here. Sin	nilarly, if you have mo	re than one
Name Address -NONE-	On	which line in	Part 1 did you ente	r the creditor?	
	Las	st 4 digits of a	account number		

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Page 20 of 54 Document Fill in this information to identify your case: Debtor 1 Peggy A Scheu Middle Name Last Name Debtor 2 First Name Middle Name (Spouse if, filina) Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known) ☐ Check if this is an amended filing Official Form 106E/F Schedule E/F: Creditors Who Have Unsecured Claims 12/15 Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. If you have no information to report in a Part, do not file that Part. On the top of any additional pages, write your name and case number (if known). Part 1: List All of Your PRIORITY Unsecured Claims 1. Do any creditors have priority unsecured claims against you? No. Go to Part 2. ☐ Yes. Part 2: List All of Your NONPRIORITY Unsecured Claims 3. Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2 Total claim 4.1 157.50 **Advocate Medical Group** 7852 Last 4 digits of account number Priority Creditor's Name 1901 S Meyers Rd. When was the debt incurred? 05/15 Ste. 350 Villa Park, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Medical services Other. Specify 4.2 40.00 Advocate Medical Group Last 4 digits of account number

Priority Creditor's Name

Ste. 350

Villa Park, IL 60181

1901 S Meyers Rd.

Number Street City State Zlp Code

When was the debt incurred?

03/12/15

As of the date you file, the claim is: Check all that apply

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Advocate Medical Group

Priority Creditor's Name

Last 4 digits of account number

\$ 40.00

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eptor	Peggy A Scheu		Case number (if know)		
	1901 S Meyers Rd. Ste. 350	When was the debt incurred?	05/19/15		
-	Villa Park, IL 60181 Number Street City State Zlp Code	As of the date you file, the claim	is. Chack all that apply		
		•	is. Officer all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only □ Debtor 2 only	☐ Unliquidated			
	_	☐ Uniiquidated			
	Debtor 1 and Debtor 2 only	Disputed	d alaim.		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:		
	☐ Check if this claim is for a community debt	☐ Student loans			
	Is the claim subject to offset?	☐ Obligations arising out of a sepa not report as priority claims	aration agreement or divorce that you did		
	■ No	☐ Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	■ Other. Specify Medic	cal Services		
	Advocate Medical Group	Last 4 digits of account number		\$	25.00
	Priority Creditor's Name 1901 S Meyers Rd. Ste. 350	When was the debt incurred?	04/18/14		
	Villa Park, IL 60181 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	Other. Specify Medic	cal services		
7	Advocate Medical Group	Last 4 digits of account number		\$	37.50
	Priority Creditor's Name 1901 S Meyers Rd. Ste. 350	When was the debt incurred?	06/17/15		
	Villa Park, IL 60181 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	☐ Contingent			
	■ Debtor 1 only				
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community ☐ Student loans debt				
	ls the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did		
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
	Yes	■ Other. Specify Medic	cal Services		

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Document Page 23 of 54 Case number (if know) Debtor 1 Peggy A Scheu 4.8 125.00 **Advocate Medical Group** Last 4 digits of account number Priority Creditor's Name 1901 S Meyers Rd. When was the debt incurred? 06/20/15 Ste. 350 Villa Park, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Services** Other. Specify 4.9 35.00 **Advocate Medical Group** Last 4 digits of account number \$ Priority Creditor's Name 1901 S Meyers Rd. When was the debt incurred? 04/01/14 Ste. 350 Villa Park, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated □ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt

4.10 **Advocate Medical Group**

Is the claim subject to offset?

Priority Creditor's Name 1901 S Meyers Rd.

Ste. 350

■ No

☐ Yes

Villa Park, IL 60181

Number Street City State Zlp Code

Last 4 digits of account number

not report as priority claims

Other. Specify

When was the debt incurred?

04/20/15

 \square Obligations arising out of a separation agreement or divorce that you did

Medical services

Debts to pension or profit-sharing plans, and other similar debts

As of the date you file, the claim is: Check all that apply

40.00

\$

Case 15-43821 Doc 1 Filed 12/31/15 Entered 12/31/15 16:14:33 Desc Main Page 24 of 54 Document Case number (if know) Debtor 1 Peggy A Scheu Who incurred the debt? Check one. Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical services** Other. Specify 4.11 **Advocate Medical Group** 40.00 Last 4 digits of account number Priority Creditor's Name 1901 S Meyers Rd. When was the debt incurred? 08/03/15 Ste. 350 Villa Park, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ■ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? $\hfill\square$ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical Services** Other. Specify 4.12 40.00 **Advocate Medical Group** Last 4 digits of account number Priority Creditor's Name 1901 S Meyers Rd. When was the debt incurred? 08/01/14 Ste. 350 Villa Park, IL 60181 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes **Medical Services** Other. Specify

Advocate Medical Group
Priority Creditor's Name

Last 4 digits of account number

40.00

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Deptor	Peggy A Scheu		Case number (if know)	
	1901 S Meyers Rd. Ste. 350	When was the debt incurred?	06/24/15	
	Villa Park, IL 60181 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	_		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify	cal Services	
1.14	Advocate Medical Group	Last 4 digits of account number		\$ 40.00
	Priority Creditor's Name 1901 S Meyers Rd. Ste. 350	When was the debt incurred?	07/27/15	
	Villa Park, IL 60181 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	Debtor 1 only	g .		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	aration agreement or divorce that you did	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medic	cal Services	
4.15	Advocate Medical Group	Last 4 digits of account number		\$ 40.00
	Priority Creditor's Name 1901 S Meyers Rd. Ste. 350	When was the debt incurred?	05/05/14	
	Villa Park, IL 60181 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent		
	■ Debtor 1 only			
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	☐ Obligations arising out of a sepanot report as priority claims	aration agreement or divorce that you did	
	No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	Other. Specify Medic	cal services	

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Document Page 26 of 54 Case number (if know) Debtor 1 Peggy A Scheu 4.16 48,321.00 Chase Bank USA Last 4 digits of account number **XXXX** Priority Creditor's Name P.O. Box 15298 When was the debt incurred? 02/00 Wilmington, DE 19850 As of the date you file, the claim is: Check all that apply Number Street City State Zlp Code Who incurred the debt? Check one. ☐ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Credit card purchases Other. Specify 4.17 18.14 **Elmhurst Memorial Hospital** Last 4 digits of account number \$ Priority Creditor's Name PO Box 4052 When was the debt incurred? 03/04/14 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent ■ Debtor 1 only Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only □ Disputed Type of NONPRIORITY unsecured claim: \square At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes **Medical services** Other. Specify 4.18 **Elmhurst Memorial Hospital** 17.98 Last 4 digits of account number \$ Priority Creditor's Name PO Box 4052 When was the debt incurred? 04/15/14 Carol Stream, IL 60197 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Contingent ■ Debtor 1 only ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another

Is the claim subject to offset?

☐ Check if this claim is for a community

☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims

☐ Student loans

☐ Debts to pension or profit-sharing plans, and other similar debts

☐ Yes Other. Specify

debt

■ No

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Debtor 1 Peggy A Scheu

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Case number (if know)

4.19	Elmhurst Memorial Hospital	Last 4 digits of account number	\$ 502.61
	Priority Creditor's Name PO Box 4052	When was the debt incurred? 02/16-02/18/2014	
	Carol Stream, IL 60197 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	Debtor 1 only	·	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt	☐ Student loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical services	
4.20	Elmhurst Memorial Hospital	Last 4 digits of account number	\$ 1,367.71
	Priority Creditor's Name PO Box 4052 Carol Stream, IL 60197	When was the debt incurred? 04/09/14	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one. Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	<u> </u>		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	- Gudent loans	
	Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical services	
4.21	Lawrence D. Wilkin, MD	Last 4 digits of account number	\$ 43.32
	Priority Creditor's Name 255 W. 1st St. Elmhurst, IL 60126	When was the debt incurred? 02/18/2014	
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	☐ Contingent	
	■ Debtor 1 only		
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	□Yes	■ Other. Specify Medical services	

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San Antonio, TX 78288-1600 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Contingent Debtor 1 only Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Check if this claim is for a community ☐ Student loans debt Is the claim subject to offset? ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Credit card purchases Other. Specify

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Debtor 1 Peggy A Scheu

Case number (if know)

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Name Address -NONE-

On which entry in Part 1 or Part2 did you list the original creditor?

Line of (Check one):

Part 1: Creditors with Priority Unsecured Claims

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

Part 4: Add the Amounts for Each Type of Unsecured Claim

Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total clai	m
	6a.	Domestic support obligations	6a.	\$	0.00
Total claims					
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
	6e.	Total. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim	
	6f.	Student loans	6f.	\$	526.00
Total claims				-	
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	67,007.26
	6j.	Total. Add lines 6f through 6i.	6j.	\$	67,533.26

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		Docume	THE TAUC SO OF S	
Fill in this infor	rmation to identify your	case:		
Debtor 1	Peggy A Scheu			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

I	Person or	company with	h whom you have the cer, Street, City, State and ZIP Co	contract or lease	State what the contract or lease is for
2.1					
	Name				
	1441110				
	Number	Street			_
	City		State	ZIP Code	-
2.2					
	Name				_
	ivame				
	Number	Street			_
		0001			
	City		State	ZIP Code	_
2.2	City		State	Zii Code	
2.3					_
	Name				
	Number	04			_
	Number	Street			
					_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5	-				
	Name				_
	ivallie				
	Number	Street			_
	City		State	ZIP Code	_
	Oity		Jiaie	ZII OUG	

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		Documen	t Page 31 of 54	
Fill in th	nis information to identify your	case:		
Debtor 1	Peggy A Scheu			
	First Name	Middle Name	Last Name	_
Debtor 2				_
(Spouse if,	filing) First Name	Middle Name	Last Name	
United S	States Bankruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS	_
Caca nu	ımhor			
Case nu (if known)				☐ Check if this is an
				amended filing
-	. =			
Officia	al Form 106H			
Sche	edule H: Your Code	ebtors		12/15
eople a ill it out, our nan	are filing together, both are eque, and number the entries in the ne and case number (if known) to you have any codebtors? (If	ally responsible for supply boxes on the left. Attach and a consideration.		ce is needed, copy the Additional Page, the top of any Additional Pages, write
■ Y	'es			
Arizo		Nevada, New Mexico, Puer	perty state or territory? (Community property State or territory? (Community property Recommendation), and Wiscommunity Recommendation, and Wiscommunity Recommendati	
in liı Forr	ne 2 again as a codebtor only i	f that person is a guaranto	or or cosigner. Make sure you have li	is filing with you. List the person shown sted the creditor on Schedule D (Officialule D, Schedule G to
	Column 1: Your codebtor Name, Number, Street, City, State and Zl	P Code		he creditor to whom you owe the debt hedules that apply:
3.1	Thomas Scheu 1691 Fir Ave Fresno, CA 93711		■ Schedule □ Schedule □ Schedule Fifth Third	e E/F, line e G
3.2	Thomas Scheu 1691 Fir Ave Fresno, CA 93711		☐ Schedule	e D, line2.1 e E/F, line e G Chartered Bank
3.3	Thomas Scheu 1691 Fir Ave Fresno, CA 93711			

Schedule H: Your Codebtors

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Case number (if known)

	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	Thomas Scheu 1691 Fir Ave Fresno, CA 93711	■ Schedule D, line □ Schedule E/F, line □ Schedule G PNC Bank
3.5	Thomas Scheu 1691 Fir Ave Fresno, CA 93711	☐ Schedule D, line ■ Schedule E/F, line4.16 ☐ Schedule G Chase Bank USA
3.6	Thomas Scheu 1691 Fir Ave Fresno, CA 93711	□ Schedule D, line ■ Schedule E/F, line4.23 □ Schedule G PNC Bank
3.7	Thomas Scheu 1691 Fir Ave Fresno, CA 93711	□ Schedule D, line ■ Schedule E/F, line4.24 □ Schedule G USAA Savings Bank

Schedule H: Your Codebtors

Debtor 1 Peggy A Scheu

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Fill	in this information to identify your o	ase:				1			
	otor 1 Peggy A Sc								
	otor 2 ouse, if filing)				_				
Uni	ted States Bankruptcy Court for the	e: NORTHERN DISTRIC	T OF ILLINOIS		_				
	se number nown)			☐ A suppleme	An amended filing A supplement showing postpetition chapter				
\bigcirc	fficial Form 106I							the following date:	
	chedule I: Your Inc	ome				MM / DD/ Y	YYY		12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. The describe Employment	ır spouse is not filing wi	th you, do not includ	le infori	mat	ion about your sp	ouse	. If more space is	needed,
1.	Fill in your employment information.		Debtor 1			Debtor 2	or n	on-filing spouse	
	If you have more than one job,	Employment status	■ Employed	☐ Emplo	☐ Employed				
	attach a separate page with information about additional	Employment status	☐ Not employed			☐ Not e	☐ Not employed		
	employers.	Occupation	Assistant to Dea	n of St	ude	ents			
	Include part-time, seasonal, or self-employed work.	Employer's name	Employer's name Elmhurst College						
	Occupation may include student or homemaker, if it applies.	nt Employer's address							
		How long employed th	nere? 8 years						
Pai	Give Details About Mor	nthly Income							
	mate monthly income as of the duse unless you are separated.	late you file this form. If	you have nothing to re	port for	any	line, write \$0 in the	spa	ce. Include your no	on-filing
-	ou or your non-filing spouse have m e space, attach a separate sheet to		ombine the information	n for all e	emp	loyers for that person	on on	the lines below. If	you need
						For Debtor 1		or Debtor 2 or on-filing spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	3,840.52	\$_	N/A	
3.	Estimate and list monthly over	time pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Add li	ne 2 + line 3.		4.	\$	3,840.52	,	\$ <u>N/A</u>	

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Debto	or 1	Peggy A Scheu		Case r	number (if known)				
				For	Debtor 1		r Debtor : n-filing s		
	Cop	by line 4 here	4.	\$	3,840.52	\$	9	N/A	_
5.	l iet	all payroll deductions:							_
J.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	711.57	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.	\$—	216.67	\$ -		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$_		N/A	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$		N/A	_
	5e.	Insurance	5e.	\$	0.00	\$_		N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$		N/A	_
	5g.	Union dues	5g.	\$	0.00	\$		N/A	_
	5h.	Other deductions. Specify: Life insurance	_ 5h.+	- \$	0.99	+ \$ _		N/A	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	929.23	\$_		N/A	<u>-</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,911.29	\$_		N/A	<u>-</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total							
		monthly net income.	8a.	\$	0.00	\$		N/A	
	8b.	Interest and dividends	8b.	\$	0.00	\$		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$		N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$		N/A	-
	8e.	Social Security	8e.	\$	0.00	\$		N/A	<u> </u>
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income	- 8f. 8g.	\$	0.00	\$_ \$		N/A N/A	
	8h.	Other monthly income. Specify:	8h.+	· · —	0.00	*		N/A	_
	011.		_ 0111		0.00	΄		11//	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$_		N/A	A
10.	Cal	culate monthly income. Add line 7 + line 9.	10. \$	7	2,911.29 + \$		N/A	= \$	2,911.29
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	'		-				_,0:::=0
11.	Inclu othe Do r	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not exify:	deper	•		•		_	0.00
		If the amount in the last column of line 10 to the amount in line 11. The restet that amount on the Summary of Schedules and Statistical Summary of Certallies						\$	2,911.29
								Combi	
13.	Do :	you expect an increase or decrease within the year after you file this form	?					month	ly income
		No.							
	1.1	Yes, Explain:							

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Fill i	n this informa	ation to identify y	our case:			Ĭ			
Debt	or 1	Peggy A Sch	neu				eck if this is:	filia a	
Debt	or 2						A supplemen	t showing postpetition of	
(Spo	use, if filing)						13 expenses	as of the following date):
Unite	ed States Bank	ruptcy Court for the:	NORTH	ERN DISTRICT OF ILLIN	OIS		MM / DD / Y	/YY	
Case (If kn	e number								
Of	ficial Fo	orm 106J							
Sc	hedule	J: Your	Exper	ises					12/15
info	rmation. If n		eded, atta	. If two married people a ach another sheet to this n.					
Part	1: Desc Is this a joi	ribe Your House	hold						
١.	No. Go to								
			in a separ	ate household?					
		1 0	•						
	□ Y	es. Debtor 2 mu	st file Offic	ial Form 106J-2, Expense	s for Separate Hous	sehold of D	ebtor 2.		
2.	Do vou hav	e dependents?	■ No						
	Do not list Dand Debtor	Debtor 1	☐ Yes.	Fill out this information for each dependent	Dependent's relation		Dependen age	t's Does depende live with you?	nt
	Do not state	e the						□ No	_
	dependents	names.						Yes	
								□ No □ Yes	
								D Yes	
								☐ Yes	
								□ No	
2	Da							Pes	
3.		penses include of people other t	han	No Yes					
	yourself an	d your depende	nts? ☐	res					
		nate Your Ongoi							
expe		a date after the		uptcy filing date unless y y is filed. If this is a sup					
Incl	ude expense	es paid for with	non-cash	government assistance	if you know				
	value of suc icial Form 1		d have in	cluded it on Schedule I:	Your Income		You	r expenses	
(011	iciai i Oilli i	001.)						,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
4.		or home owners nd any rent for th		ses for your residence. or lot.	Include first mortgag	ge 4.	\$	1,424.00	
	If not inclu	ded in line 4:							
	4a. Real	estate taxes				4a.	\$	518.75	
	•	erty, homeowner's				4b.	·	86.66	
				upkeep expenses		4c.	·	100.00	
5.		eowner's associa mortgage paym		dominium dues our residence, such as ho	me equity loans	4d. 5.		0.00 1,046.00	
٥.	aaonai	sgago payiii	ioi y		and equity loans	٥.	¥	1,070.00	

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Deb	otor 1	Peggy A	Scheu	Case n	numl	ber (if known)	
6.	Utilit	ies:					
٥.	6a.		heat, natural gas	6	За.	\$	125.00
	6b.		wer, garbage collection		6b.		86.00
	6c.	-	e, cell phone, Internet, satellite, and cable servi		6c.	·	250.00
	6d.	Other. Spe			3d.	·	0.00
7.			ekeeping supplies		7.	\$	350.00
8.			children's education costs		8.	\$	0.00
9.			ry, and dry cleaning		9.	\$	85.00
-		•	oroducts and services		ا. .10	·	0.00
		•	ntal expenses		10. 11.		
			•		11.	\$	200.00
12.			Include gas, maintenance, bus or train fare. ar payments.	•	12.	\$	0.00
13			clubs, recreation, newspapers, magazines,		13.	\$	200.00
14.			ributions and religious donations		14.		100.00
		rance.	ributions and religious donations		۱٠.	Ψ	100.00
13.			surance deducted from your pay or included in	lines 4 or 20			
		Life insura	, , ,		5a.	\$	0.00
		Health ins			5b.	·	0.00
		Vehicle in:			5c.	:	174.82
						·	
40			Irance. Specify:		5d.	\$	0.00
16.	Spec		clude taxes deducted from your pay or include		16.	\$	0.00
17.		,	ease payments:				0.00
	17a.	Car paym	ents for Vehicle 1	17	7a.	\$	296.00
	17b.	Car payme	ents for Vehicle 2	17	7b.	\$	0.00
	17c.	Other. Spe	ecify:	17	7c.	\$	0.00
		Other. Spe			7d.	\$	0.00
18.	Your	payments	of alimony, maintenance, and support that				
			your pay on line 5, Schedule I, Your Income	(Oo.a O	18.		0.00
19.			s you make to support others who do not liv	e with you.		\$	0.00
	Spec	,			19.		
20.			erty expenses not included in lines 4 or 5 of				
	20a.	Mortgages	s on other property		Ja.		0.00
	20b.	Real estat	e taxes	20	Ob.	\$	0.00
	20c.	Property,	nomeowner's, or renter's insurance	20	Oc.	\$	0.00
	20d.	Maintenar	ice, repair, and upkeep expenses	20	οd.	\$	0.00
	20e.	Homeown	er's association or condominium dues	20	Эe.	\$	0.00
21.	Othe	r: Specify:				+\$	0.00
		. ,					0.00
22.		•	monthly expenses				
	22a.	Add lines 4	through 21.			\$	5,042.23
	22b.	Copy line 2	2 (monthly expenses for Debtor 2), if any, from	Official Form 106J-2		\$	
	22c.	Add line 22	a and 22b. The result is your monthly expense	S.		\$	5,042.23
			, , ,				-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
23.			monthly net income.			_	
			12 (your combined monthly income) from Sche		3a.	*	2,911.29
	23b.	Copy your	monthly expenses from line 22c above.	23	3b.	-\$	5,042.23
	23c.	Subtract v	our monthly expenses from your monthly incor	ne.			
	_50.		is your <i>monthly net income</i> .	23	3c.	\$	-2,130.94
	_						
24.	Do y	ou expect	an increase or decrease in your expenses w	ithin the year after you file	this	s form?	
			u expect to finish paying for your car loan within the ye terms of your mortgage?	ar or do you expect your mortgage	e pa	syment to increase	or decrease because of a
			terms or your mongage:				
	■ No		[-				
	□ Ye	es.	Explain here:				

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Fill in this infor	rmation to identify your	case:		
Debtor 1	Peggy A Scheu			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Did	you pay or agree to pay someone who is NOT an attorney to	help y	ou fill out bankruptcy forms?
	No		
	Yes. Name of person		. Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
that	er penalty of perjury, I declare that I have read the summary a they are true and correct.	ınd scl	nedules filed with this declaration and
-	/s/ Peggy A Scheu Peggy A Scheu	^ _	Signature of Debtor 2
	Signature of Debtor 1		
	Date December 31, 2015		Date

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Fill	in this inform	ation to identify you	r case:			
Del	btor 1	Peggy A Scheu	Middle Name	Last Name		
Del	btor 2	i iist Name	Middle Name	Last Name		
(Spo	ouse if, filing)	First Name	Middle Name	Last Name		
Uni	ited States Ban	kruptcy Court for the:	NORTHERN DISTRICT C	OF ILLINOIS		
Cas	se number					
	nown)				-	Check if this is an
						amended filing
	ficial For				_	
St	atement	of Financial A	Affairs for Individ	luals Filing for B	ankruptcy	12/15
					equally responsible for su	
		ore space is needed,). Answer every que:		this form. On the top of an	y additional pages, write yo	our name and case
	<u> </u>	,	rital Status and Where You	Lived Defere		
Fal				Lived Before		
1.	What is your	current marital statu	is?			
	Married					
	□ Not marr	ied				
2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
	-		•	•		
	■ No □ Yes List	all of the places you	ived in the last 3 years. Do n	ot include where you live nov	N.	
	□ 165. LISI	all of the places you	ived in the last 3 years. Do in	ot include where you live not	v.	
	Debtor 1 Pri	or Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
•	Mithin the le	-t O			-14	-2 (0
s. stat					nity property state or territo ico, Texas, Washington and V	
	-					
	■ No □ Yes, Mal	ke sure vou fill out Sc	hedule H: Your Codebtors (O	fficial Form 106H)		
	1 C3. Mai	te sure you mi out oo	reduie 11. Tour Godebiors (G	molai i omi room.		
Pai	rt 2 Explair	the Sources of You	r Income			
4.	Did you have	any income from er	nnlovment or from operatin	na a husiness durina this v	ear or the two previous cale	endar vears?
	Fill in the total	amount of income yo	ou received from all jobs and	all businesses, including part	time activities.	maar youro.
	If you are filing	g a joint case and you	have income that you receiv	e together, list it only once u	nder Debtor 1.	
	□ No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income	Gross income	Sources of income	Gross income
			Check all that apply.	(before deductions and exclusions)	Check all that apply.	(before deductions and exclusions)
Fro	om January 1	of current year until	■ W	\$44,000.00	□ Wages commissions	,
		for bankruptcy:	■ Wages, commissions, bonuses, tips	Ψ,000.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		☐ Operating a business	
			_ 5,5.49 4 546111000		•	

Official Form 107

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Case number (if known) Document Debtor 1 Peggy A Scheu

				Debtor 1				Debtor 2		
				Sources of Check all			s income e deductions and sions)	Sources of Check all the		Gross income (before deductions and exclusions)
	r last caler inuary 1 to	ndar year: December	31, 2014)	■ Wages	wages, commissions,		\$43,608.00	☐ Wages, of bonuses, tip	commissions s	,
				☐ Operat	ing a business			☐ Operating	g a business	
		dar year be December		■ Wages	, commissions, ips		\$44,959.00	☐ Wages, of bonuses, tip	commissions	,
				☐ Operat	ing a business			☐ Operating	g a business	
5.	Include in unemploy gambling	come regard ment, and c and lottery	dless of whet other public b winnings. If y	ther that inco enefit payme ou are filing a	me is taxable. Ex nts; pensions; rer a joint case and y	amples on tal incor ou have		e alimony; child sends; money collectived together	ected from la , list it only or	al Security, wsuits; royalties; and nce under Debtor 1.
	☐ Yes.	Fill in the d	etails.							
				Debtor 1				Debtor 2		
				Sources of Describe b			s income e deductions and sions)	Sources of Describe be		Gross income (before deductions and exclusions)
6.		r Debtor 1's Neither D	s or Debtor 2 ebtor 1 nor	2's debts pri Debtor 2 has		r debts? umer del	ots. Consumer de	bts are defined in	n 11 U.S.C. §	101(8) as "incurred by a
			90 days bef	ore you filed	amily, or househo for bankruptcy, di		y any creditor a to	otal of \$6,225* or	more?	
		☐ Yes	paid that c	each creditor		nts for do	mestic support ob			nd the total amount you ort and alimony. Also, do
		* Subject					at for cases filed	on or after the da	ate of adjustm	nent.
	■ Yes.				e primarily consumor for bankruptcy, di		ots. y any creditor a to	otal of \$600 or m	ore?	
		No.	Go to line	7.						
		□ Yes	include pa	yments for do						that creditor. Do not not include payments to
	Creditor	's Name an	d Address		Dates of payme	ent	Total amount paid	Amount you		is payment for
7.	Insiders in corporation including	nclude your ns of which	relatives; any you are an o	y general par officer, directo	tners; relatives of or, person in contr	any genorol, or ow		nerships of which re of their voting	n you are a go securities; ar	
	■ No □ Yes.	List all payı	ments to an i	nsider						
	Insider's	Name and	Address		Dates of payme	ent	Total amount paid	Amount you still ow		n for this payment

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Document Page 40 of 54 Debtor 1 Peggy A Scheu Case number (if known) Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. No Yes. List all payments to an insider **Insider's Name and Address** Amount you Reason for this payment Dates of payment Total amount paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No П Yes. Fill in the details. Case title Nature of the case Status of the case Court or agency Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. П Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity Yes. Fill in the details for each gift or contribution.

Part 6: List Certain Losses

more than \$600

Charity's Name

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other

Describe what you contributed

Value

Dates vou

contributed

Gifts or contributions to charities that total

Address (Number, Street, City, State and ZIP Code)

Case 15-43821 Doc 1 Filed 12/31/15 Entered 12/31/15 16:14:33 Desc Main Document Page 41 of 54 Debtor 1 Peggy A Scheu Case number (if known) disaster, or gambling? Nο Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address transferred or transfer was payment Email or website address made Person Who Made the Payment, if Not You Anderson & Associates, P.C. \$1,800 10/09/2015 \$1,800.00 400 S. County Farm Rd., Suite 320 Wheaton, IL 60187 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. Nο Yes. Fill in the details. **Person Who Was Paid** Description and value of any property Date payment Amount of Address transferred or transfer was payment 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. П Nο Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you Fifth Third Bank Traded in 1999 Lexus, value 12/13 5050 Kingsley Dr. of \$1,000, for Elantra Cincinnati, OH 45227 **Third Party** Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)

Official Form 107

Name of trust

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Description and value of the property transferred

Yes. Fill in the details.

Date Transfer was

made

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Case number (if known)

Debtor 1 Peggy A Scheu

Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of Name of Financial Institution and Type of account or Date account was Last balance Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy No Yes. Fill in the details. Do you still Name of Storage Facility Who else has or had access Describe the contents to it? have it? Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Describe the property Owner's Name Value Where is the property? Address (Number, Street, City, State and ZIP Code) (Number, Street, City, State and ZIP Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No

Address (Number, Street, City, State and

Governmental unit

ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Yes. Fill in the details.

Name of site

Date of notice

Environmental law, if you

know it

Case 15-43821 Doc 1 Filed 12/31/15 Entered 12/31/15 16:14:33 Document Page 43 of 54 Debtor 1 Peggy A Scheu Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Nο Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Nature of the case Status of the Court or agency Case Number Name case Address (Number, Street, City, State and ZIP Code Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business Employer Identification number **Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Peggy A Scheu Signature of Debtor 2 Peggy A Scheu Signature of Debtor 1 Date December 31, 2015 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No □ Yes

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Statement of Financial Affairs for Individuals Filing for Bankruptcy Software Copyright (c) 1996-2015 Best Case, LLC - www.bestcase.com

■ No

Official Form 107

☐ Yes. Name of Person

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

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Case number (if known) Document

Debtor 1 Peggy A Scheu

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Fill in this infor	mation to identify your			
Debtor 1	Peggy A Scheu			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number _				☐ Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	☐ Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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B8 (Form 8) (12/08) name:	☐ Retain the property and redeem it.	Page 2 □ Yes
Description of	☐ Retain the property and enter into a	□ Tes
property	Reaffirmation Agreement. Retain the property and [explain]:	
securing debt:	— Totali tile property and [explain].	
in the information below. Do not list real	Property Leases see that you listed in Schedule G: Executory Contracts and Une estate leases. Unexpired leases are leases that are still in effe property lease if the trustee does not assume it. 11 U.S.C. § 36	ct; the lease period has not yet ended.
Describe your unexpired personal prope	erty leases	Will the lease be assumed?
Lessor's name:		□ No
Description of leased		_
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased		L No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Lessor's name:		□ No
Description of leased		—
Property:		☐ Yes
Lessor's name: Description of leased		□ No
Property:		☐ Yes
Lessor's name:		□ No
Description of leased Property:		☐ Yes
Part 3: Sign Below		
Under penalty of perjury, I declare that I h	have indicated my intention about any property of my estate th	at secures a debt and any personal
X /s/ Peggy A Scheu	X	
Peggy A Scheu	Signature of Debtor 2	
Signature of Debtor 1	Ç	
Date December 31, 2015	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1.717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 15-43821 Doc 1 Filed 12/31/15 Entered 12/31/15 16:14:33 Desc Main Document Page 51 of 54

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

In r	e Peggy A Scheu		Case No.		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	NSATION OF ATTOR	NEY FOR DE	EBTOR(S)	
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing be rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy, o	r agreed to be paid	to me, for services ren	dered or to
				1,800.00	
	Prior to the filing of this statement I have received		. \$	1,800.00	
	Balance Due		. \$	0.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed compe	ensation with any other person ur	nless they are mem	bers and associates of r	ny law firm.
	☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name				v firm. A
5.	In return for the above-disclosed fee, I have agreed to ren	nder legal service for all aspects	of the bankruptcy c	ease, including:	
	 a. Analysis of the debtor's financial situation, and render b. Preparation and filing of any petition, schedules, state c. Representation of the debtor at the meeting of credito d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou 	ement of affairs and plan which n rs and confirmation hearing, and educe to market value; exen ns as needed; preparation a	nay be required; any adjourned hea	arings thereof; ; preparation and fil	ling of
6.	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.	does not include the following s chargeability actions, judici	ervice: al lien avoidanc	es, relief from stay	actions or
		CERTIFICATION			
this	I certify that the foregoing is a complete statement of any bankruptcy proceeding.	agreement or arrangement for pa	ayment to me for re	epresentation of the deb	otor(s) in
_	December 31, 2015 Date	/s/ Dennise L. McC Dennise L. McCanr Signature of Attorney Anderson & Assoc 400 S. County Farn Suite 320 Wheaton, IL 60187 (630) 653-9400 Far Name of law firm	n iates, P.C. n Rd.	0	_

United States Bankruptcy Court Northern District of Illinois

In re	Peggy A Scheu		Case No.	
		Debtor(s)	Chapter 7	
	VE	CRIFICATION OF CREDITOR M	IATRIX	
		Number of	Creditors:	12
	The above-named Debtor(s) (our) knowledge.	hereby verifies that the list of credit	ors is true and correct to	the best of my
Date:	December 31, 2015	/s/ Peggy A Scheu Peggy A Scheu Signature of Debtor		

Advocate Medical Group 1901 S Meyers Rd. Ste. 350 Villa Park, IL 60181

American Chartered Bank 4685 Winfield Rd. Warrenville, IL 60555

Chase Bank USA P.O. Box 15298 Wilmington, DE 19850

Elmhurst Memorial Hospital PO Box 4052 Carol Stream, IL 60197

Fifth Third Bank 5050 Kingsley Dr. Cincinnati, OH 45227

Lawrence D. Wilkin, MD 255 W. 1st St. Elmhurst, IL 60126

Lisle Savings Bank 1450 Maple Ave Lisle, IL 60532

Mohela/Dept of Education 633 Spirit Dr Chesterfield, MO 63005

PNC Bank PO Box 3180 Pittsburgh, PA 15230

PNC Bank 6750 Miller Road Brecksville, OH 44141

Thomas Scheu 1691 Fir Ave Fresno, CA 93711 USAA Savings Bank 10750 McDermott Fwy San Antonio, TX 78288-1600